



## PART B - FEE(S) TRANSMITTAL

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7590

01/15/2002

MARK POHL  
55 MADISON AVENUE, 4TH FLOOR  
MORRISTOWN, NJ 07960

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## Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Mark Pohl #35325	(Depositor's name)
J. Mark Pohl	(Signature)
07 March 2002	(Date)

APPLICATION NO. 09/427,447	FILING DATE 10/27/1999	FIRST NAMED INVENTOR ALEXANDER GOEN SZYNALSKI	ATTORNEY DOCKET NO.	CONFIRMATION NO. 3197
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TITLE OF INVENTION: STOP SMOKING METHOD AND COMPOSITION

TOTAL CLAIMS 2	APPLN. TYPE nonprovisional	SMALL ENTITY YES	ISSUE FEE \$640	PUBLICATION FEE \$0	TOTAL FEE(S) DUE \$640	DATE DUE 04/15/2002
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EXAMINER RIMELL, SAMUEL G	ART UNIT 2166	CLASS-SUBCLASS 434-262(HH)
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1) Pharmaceutical Patent Law, LLC  
2) Mark POHL  
a) Licensing Law, Net

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Goen Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cedar Knolls, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies

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☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PT-9-2034 is attached.☐ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

J. Mark Pohl

07 March 02

**NOTE:** The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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